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PTO/SB/01 (10-00)  
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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing      OR      ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 67,008-038/S-5451

First Named Inventor Thomas A. Millott

**COMPLETE IF KNOWN**

Application Number 10 / 083,774

Filing Date February 27, 2002

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPUTATIONALLY EFFICIENT MEANS FOR OPTIMAL  
CONTROL WITH CONTROL CONSTRAINTS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) February 27, 2002

as United States Application Number or PCT International

Application Number 10/083,774

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/271,792	February 27, 2002	

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label <input style="width: 100px; height: 20px;" type="text"/>		OR <input checked="" type="checkbox"/> Correspondence address below	
Name <b>John E. Carlson</b>			
Address <b>400 W. Maple Road</b>			
Address <b>Suite 350</b>			
City <b>Birmingham</b>		State <b>Michigan</b>	ZIP <b>48009</b>
Country <b>United States</b>	Telephone <b>(248) 988-8360</b>	Fax <b>(248) 988-8363</b>	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Thomas A.</b>		Family Name or Surname <b>Millott</b>	
Inventor's Signature <i>Thomas A. Millott</i>		Date <b>4/12/02</b>	
Residence: City <b>Milford</b>	State <b>CT</b>	Country <b>USA</b>	Citizenship <b>USA</b>
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Mailing Address			
City <b>Milford</b>	State <b>CT</b>	ZIP <b>06460</b>	Country <b>USA</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Douglas G.</b>		Family Name or Surname <b>MacMartin</b>	
Inventor's Signature		Date	
Residence: City <b>San Gabriel</b>	State <b>CA</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address <b>412 N. San Marino Avenue</b>			
Mailing Address			
City <b>San Gabriel</b>	State <b>CA</b>	ZIP <b>91775-2924</b>	Country <b>USA</b>
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>3</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label  OR ☒ Correspondence address below

Name John E. Carlson

Address 400 W. Maple Road

Address Suite 350

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State Michigan

ZIP 48009

Country United States

Telephone (248) 988-8360

Fax (248) 988-8363

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name Thomas A.  
(first and middle [if any])

Family Name Millott  
or Surname

Inventor's  
Signature

Date

Residence: City Milford

State CT

Country USA

Citizenship USA

Mailing Address 90 Pomona Avenue

Mailing Address

City Milford

State CT

ZIP 06460

Country USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Douglas G.  
(first and middle [if any])

Family Name MacMartin  
or Surname

Inventor's  
Signature

April 4, 2002  
Date

Residence: City San Gabriel

State CA

Country USA

Citizenship Canadian

Mailing Address 412 N. San Marino Avenue

Mailing Address

City San Gabriel

State CA

ZIP 91775-2914

Country USA

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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## DECLARATION

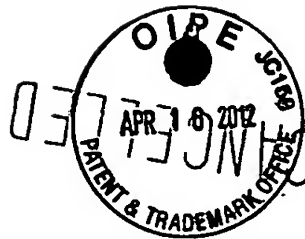
ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Robert K.		Goodman	
Inventor's Signature <i>Robert K. Goodman</i>		Date 4/2/02	
Residence: City	West Hartford	State	CT
Country	USA	Citizenship	USA
Mailing Address 6 Middlebrook Road			
Mailing Address			
City	West Hartford	State	CT
ZIP	06119	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James W.		Fuller	
Inventor's Signature		Date	
Residence: City	Amston	State	CT
Country	USA	Citizenship	USA
Mailing Address 20 Jones Street			
Mailing Address			
City	Amston	State	CT
ZIP	06231	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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Given Name (first and middle (if any))		Family Name or Surname	
Robert K.		Goodman	
Inventor's Signature		Date	
Residence: City	West Hartford	State	CT
Country	USA	Citizenship	USA
Mailing Address			
6 Middlebrook Road			
Mailing Address			
City	West Hartford	State	CT
ZIP	06119	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
James W.		Fuller	
Inventor's Signature		Date	
Residence: City	Amston	State	CT
Country	USA	Citizenship	USA
Mailing Address			
20 Jones Street			
Mailing Address			
City	Amston	State	CT
ZIP	06231	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
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